Adult Protective Services (APS) Core Training

Dynamics of Older Adult Maltreatment

TRAINER’S MANUAL
INTRODUCTION

We are pleased to welcome you to *Dynamics of Older Adult Maltreatment*, a workshop developed by Project MASTER, a program of the Academy for Professional Excellence. This material has been adapted for Ohio by the Institute for Human Services for the Ohio Human Services Training System.

The Academy for Professional Excellence was established in 1996 and provides training, technical assistance, organizational development, research, and evaluation to public and private health and human service agencies and professionals.

The Academy is a project of San Diego State University School of Social Work (founded in 1963), which offers both a bachelor’s and master’s degree in Social Work. The School of Social Work at San Diego State University was founded in 1963 and has been continuously accredited by the Council of Social Work Education since 1966.

The Academy has extensive experience in providing specialized services, including:
- Multi-disciplinary competency-based trainings
- Curriculum development
- Needs assessment
- Research
- Evaluation
- Meeting facilitation
- Organizational development consultation services

MASTER is an Archstone Foundation funded program of the Academy for Professional Excellence which has the overarching goal is to develop standardized core curricula for new APS workers and to share these trainings on a national scale. Professional training opportunities are a critical step toward ensuring APS workers have the appropriate tools to serve older adults. MASTER has worked extensively with state and national partner agencies in the development of this curriculum.

Our partners include:
- National Adult Protective Services Association Education Committee (NAPSA)
- The Statewide APS Training Project of the Bay Area Training Academy
- California Department of Social Services, Adult Services Branch
- California State University Sacramento IHSS Training Project
- Protective Services Operations Committee of the California Welfare Director's Association (PSOC)
- California Social Work Education Center Aging Initiative (CalSWEC)
ACKNOWLEDGEMENTS

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CURRICULUM OVERVIEW

Time: 6 hours

Description:

In this workshop, participants will be able to define older adult abuse, neglect, and exploitation and identify the various dynamics that underlie each. Participants will explore the role of Adult Protective Services (APS) and how dynamics might inform case interventions.

Competencies:

- **101-01-003** - Knows the legal definitions and the physical, behavioral, and emotional indicators of physical, sexual, and emotional abuse, neglect including abandonment, and exploitation of older adults

- **101-01-004** - Knows the concepts of undue influence and self-neglect and common physical, behavioral, and emotional indicators

- **101-01-005** - Knows interpersonal and intrapersonal dynamics and vulnerabilities commonly associated with physical, sexual, and emotional abuse, neglect, undue influence, exploitation, and self-neglect of older adults

- **101-02-001** - Knows the role of adult protective services caseworkers and knows ethical, cultural, and best-practice standards in adult protective services

- **105-02-002** - Understands dynamics that can reduce an older adult’s willingness or ability to provide information about their situation to the investigating caseworker

- **106-01-003** - Understands personal, interpersonal, and environmental vulnerabilities often associated with increased risk of maltreatment to older adults

- **106-01-004** - Understands the effect of family members’, caretakers’, or others’ power and control issues, mental illness, substance abuse, or domestic violence in perpetuating maltreatment of older adults

- **106-01-009** - Knows that the relationship between the perpetrator of maltreatment and the older adult is often complex, and that the older adult may feel an allegiance with the perpetrator
Learning Objectives:

By the end of this workshop, participants will be able to:

- Define older adult abuse, neglect, and exploitation as it applies to APS
- Identify various dynamics underlying older adult abuse, neglect, and exploitation
- Explore APS role and how dynamics might inform case interventions
- Identify why some older adults refuse services and remain with their abusers

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<td>3:45-4:00</td>
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Materials Needed:

- Trainer Manual
- PowerPoint Presentation
- Participant Handouts
  - Handout #1, Dynamics of Older Adult Maltreatment Power Point Slides
  - Handout #2, Power and Control Wheel
- Trainer Resources
  - Trainer Resource #1, Case Scenarios
  - Trainer Resource #2, Intake Report for Nancy
  - Video - Nancy Part 1 and Part 2 (Embedded in the PowerPoint slide and available for download). For Nancy Part 1, there is a YouTube option available at: https://youtu.be/A2J8fWDIaE. Note, that the YouTube video should be stopped at 1:44.
  - Trainer Resource #3, Resources for Comings and Goings Activity: six (6) Location Signs (home, relative’s home, hotel, apartment, domestic violence shelter, and independent living facility), two (2) Closed Signs, and six (6) small boxes or envelopes
    - Put up the signs provided in different locations around the room. Make sure there is room for at least several participants to stand near each sign. Place small boxes or envelopes under/near each sign for participants to place their payments.
    - Play money and goodwill slips divided into packets. There must be one (1) packet for each participant. Each packet should contain varying amount of money (from one (1) to six (6) bills in each) and goodwill slips (from one (1) to four (4) in each).
    - A bell (if not available, clap or whistle)
  - Trainer Resource #4, Comings and Goings Script
  - Video - Just to Have a Peaceful Life (https://youtu.be/CYesCJh7OEQ) (Embedded in the PowerPoint slide and available for download)
• Computer with LCD (digital projector), DVD player or internet access (if needed), and speakers

• Name tents

• Easel, flipchart paper, markers, and tape
SECTION I: INTRODUCTIONS AND WHAT’S IN IT FOR ME (WIIFM)

Time: 20 minutes

Materials:

- PowerPoint Slide #1-3

- Handout #1, Dynamics of Older Adult Maltreatment PowerPoint Slide

A. Introductions and WIIFM

Trainer Instruction

- Introduce yourself; provide any relevant information about your position, work history, or other relevant information.

- Ask participants to introduce themselves, give their position, where they work and how long they have worked in the field.

- As participants introduce themselves, ask them to identify at least one specific learning need relative to the day’s learning objectives – “What specifically do you need to know more about to do your work?” Use flip chart paper to document learning needs.

- Review learning objectives with the group and distribute Handout #1, Dynamics of Older Adult Maltreatment PowerPoint Slides. By the end of this workshop, participants will be able to:
  - Define older adult abuse, neglect, and exploitation as it applies to APS
  - Identify various dynamics underlying older adult abuse, neglect, and exploitation
- Explore APS role and how dynamics might inform case interventions
- Identify why some older adults refuse services and remain with their abusers

- If there are participant concerns that are not included in the training content, help direct them to a workshop that addresses that content. Throughout the workshop, make a point to address the WIIFM issues.

- Review housekeeping information such as break and lunch times, location of restrooms, and cell phone use.

**Content to be Discussed**

- Early research emphasized caregiver stress as the underlying cause of older adult maltreatment – the older adult’s care needs caused the caregiver to “lose it” and abuse or neglect.

- Research in recent years has debunked the caregiver stress theory and found that older adult abuse is more closely linked to domestic violence than previously thought. Under this perspective, abuse is rooted in the behaviors of the abuser and not the characteristics (e.g. care needs) of the older adult.

- Focusing on the older adult’s safety is closely intertwined with holding the abuser accountable. While in “traditional” domestic violence abuser accountability means arrest and prosecution, in the complex field of APS it means not only that but other interventions which will be discussed later.

- It is acknowledged that in some APS cases the abuser lacks capacity. In those cases, traditional APS approaches, such as support services and education, are appropriate. This workshop is designed to help APS professionals identify power and control dynamics where they exist and to modify their case interventions accordingly.

- The purpose of this workshop is to examine the dynamics of older adult abuse, to include neglect and exploitation, perpetrated by others. The dynamics of self-neglect are quite different. This workshop does not address self-neglect among
older adults, although it is recognized that a great deal of APS work involves self-neglect cases.
SECTION II:
WHAT IS ABUSE, NEGLECT, AND EXPLOITATION IN APS?

Time: 45 minutes

Competencies Addressed:

- 101-01-003 - Knows the legal definitions and the physical, behavioral, and emotional indicators of physical, sexual, and emotional abuse, neglect including abandonment, and exploitation of older adults

- 101-01-004 - Knows the concepts of undue influence and self-neglect and common physical, behavioral, and emotional indicators

- 101-01-005 - Knows interpersonal and intrapersonal dynamics and vulnerabilities commonly associated with physical, sexual, and emotional abuse, neglect, undue influence, exploitation, and self-neglect of older adults

Materials:

- PowerPoint Slide #4-18

A. What Is Abuse, Neglect, and Exploitation in APS?

Trainer Instruction

- Ask for volunteers to provide definitions of older adult abuse, neglect, and exploitation.

- After soliciting a few responses, lead a large group discussion to cover the following content. Highlight the recent addition of ‘Abandonment’ in definitions for Adult Protective Services.
Content to be Discussed

- In Ohio, APS workers are responsible for receiving and screening referrals, and investigating reports of abuse, neglect, and exploitation.

- According to Ohio Administrative Code (OAC) 5101:2-20-01 Adult Protective Services Definitions:

  - "Abuse" means the infliction upon an adult by self or others of injury, unreasonable confinement, intimidation or cruel punishment with resulting physical harm, pain, or mental anguish.
    - "Emotional abuse" means to threaten, humiliate, intimidate, or psychologically harm an adult. Also, the violation of an adult's right to make decisions and loss of privacy.
    - "Physical abuse" means intentional use of physical force resulting in bodily injury, pain or impairment.
    - "Sexual abuse" means nonconsensual sexual contact of any kind with an adult regardless of age of the perpetrator.

  - "Neglect" means any of the following:
    - Failure of an adult to provide for self the goods or services necessary to avoid physical harm, mental anguish, or mental illness
    - Failure of a caretaker to provide such goods or services
    - Abandonment

  - "Exploitation" means the unlawful or improper act of a person using, in one or more transactions, an adult or an adult's resources for monetary or personal benefit, profit or gain when the person obtained or exerted control over the adult or the adult's resources in any of the following ways:
    - Without the adult's consent or the consent of the person authorized to give consent on the adult's behalf.
    - Beyond the scope of the express or implied consent of the adult or the person authorized to give consent on the adult's behalf.
By deception
By threat
By intimidation

- A person is an individual who is known to the adult subject through a familial and/or social relationship.

- In 2018, Ohio added a definition of Abandonment and revised the definition of Caretaker in Ohio Administrative Code (OAC) 5101:2-20-01, Adult Protective Services Definitions.

  - "Abandonment" means desertion of an adult by a caretaker without having made provision for transfer of the adult’s care.

  - "Caretaker" means a person assuming the primary responsibility for the care of an adult by any of the following means:
    - On a voluntary basis
    - By contract
    - Through receipt of payment for care
    - As a result of a family relationship
    - By the order of a court of competent jurisdiction

B. Who Are the Victims?

Trainer Instruction

- Lead a large group discussion to cover the following content.

Content to be Discussed

- Anyone can be a victim of abuse, neglect, or exploitation. According to Ohio Administrative Code (OAC) 5101:2-20-01, Adult Protective Services Definitions, "Adult" means any person sixty years of age or older within this state who is handicapped by the infirmities of aging or who has a physical or mental impairment which prevents the person from providing for the person's own care or protection, and who resides in an independent living arrangement.

- It is often cited that older adult abuse is underreported. The New York State Elder Abuse Prevalence Study (2011) found that for every case known to programs and agencies, 24 were unknown.
• In a 2010 study, the following was cited: one-year prevalence was 4.6% for emotional abuse, 1.6% for physical abuse, 0.6% for sexual abuse, 5.1% for potential neglect, and 5.2% for current financial abuse by a family member. One in 10 respondents reported emotional, physical, or sexual mistreatment or potential neglect in the past year.

• Most instances of abuse, neglect, or exploitation occurs in the older adults’ home in the community.

• Several studies conclude specific factors that might make someone more at risk of becoming a victim of older abuse, neglect, or exploitation. For example:
  o Low social support; no partner or spouse
  o Dementia; need for assistance with daily living activities
  o Experience with previous traumatic events including interpersonal and domestic violence
  o Functional impairment and poor physical health
  o Women appear to be more likely abused than men
  o Living with a large number of household members other than a spouse is associated with an increased risk of financial exploitation
  o Lower income or poverty

C. Indicators of Maltreatment

Trainer Instruction

• Lead a large group discussion to cover the following content. Solicit examples from participants while discussing the various categories of indicators.
Content to be Discussed

- There are a variety of indicators that may point to abuse, neglect, or exploitation. Signs can include but are not limited to:

**General Behavioral Indicators**

- Suddenly withdraws from routine activities
- Is afraid to speak in the presence of the suspect or looks to the suspect to answer questions
- Is confined (e.g. tied to furniture or locked in a room)
- Is isolated
- Denies, minimizes, or blames self for what has happened, is hesitant to discuss, or gives “coded” disclosures – such as “my son has a temper”
- Unexplainable changes in behavior, sleep disturbances
- Waits or fails to seek out help or medical treatment, misses appointments, or frequently changes doctors or hospitals
- Visits hospital or physician with vague complaints such as anxiety, headaches, or digestive problems
- Provides implausible or inconsistent explanations about what has occurred
- Appears afraid, embarrassed, ashamed, withdrawn, or depressed

**Indicators of Physical Abuse**

- Bruises, black eyes, welts, lacerations, ligature marks
- Bone fractures, broken bones, skull fractures
- Open wounds, cuts, punctures, untreated injuries
- Sprains, dislocations, internal injuries or bleeding
Broken glasses, physical signs of being subjected to punishment, signs of being restrained

Laboratory findings of a medication overdose or underutilization of prescribed drugs

Exacerbation of pre-existing health conditions

Patterned injuries caused by an object

Injuries in various degrees of healing, injuries that match hands, fingers, or objects

Injuries are NOT in locations normally associated with accidental injuries such as: on the outside of arms, inside of legs, scalp, around throat, face, soles of feet, inside mouth, on or behind the ears, on the trunk, genitalia, and buttocks

Repeated, unexplained, or untreated injuries; injuries that don’t match stories

**Indicators of Sexual Abuse**

Infections, pain, or bleeding in genital areas

Difficulty walking or sitting

Torn, stained, or bloody clothing, including underwear, bedding, or furnishings

Inappropriate (enmeshed) relationship between older adult and alleged perpetrator

Bruises to outer arms, chest, mouth, genitals, abdomen, pelvis, or inside thighs

Bite marks

Unexplained STDs or HIV

Coded disclosures such as “I might be pregnant” or “He makes me do bad things”
Indicators of Neglect

- Dehydration or malnutrition
- Presence of untreated bedsores (pressure ulcers), rashes
- Under, over or mis-medicating an older adult (look for changes in behavior or if the amount of medication available does not match the prescription, check refill dates)
- Leaving an older adult in feces, urine
- Failure to follow recommended turning procedures for older adults who are bedridden
- Poor hygiene, unclean odor
- Failure to take older adult to medical appointments, hospital, dental appointments
- Unexplained changes in older adult’s weight or cognition
- Inappropriate clothing for conditions
- Soiled bedding, chairs, linens, clothing
- Dirty, unused, or broken toilet, sink, refrigerator
- Inadequate supply of food, lack of evidence of meals
- Broken, or absence of, needed medical equipment, aids such as glasses, hearing aids, walkers, wheelchairs

Indicators of Financial Exploitation

- The older adult is unaware of monthly income and bills
- Important possessions, documents, or credit cards are missing
- Many bills are unpaid
The caregiver refuses to spend the older adult’s money on the older adult.

The older adult has given many expensive gifts to others.

Checks are made out to cash.

An individual asks or coerces an older adult to sign a blank check and then uses the money for personal gain.

D. Who Abuses, Neglects, or Exploits Older Adults?

**Trainer Instruction**

- Lead a large group discussion to cover the following content.

**Content to be Discussed**

- While many older adults fear that they may be victimized by strangers, the unfortunate reality is that abuse, neglect, and exploitation are more likely to be committed by perpetrators who are adult children or spouses, more likely to be male, to have history of past or current substance abuse, to have mental or physical health problems, to have history of trouble with the police, to be socially isolated, to be unemployed or have financial problems, and to be experiencing major stress.

- To a lesser degree, perpetrators may also include:
  - Caregivers
  - Friends (including “new best friends”)
  - Persons in positions of trust or authority such as guardians, attorneys, financial advisors, and clergy

- The Acierno study (2010) found the following:
  - Physical abuse: the largest category of abusers (57%) were spouses or partners
o Sexual abuse: spouses or partners accounted for 40% of sexual abuse; acquaintances also accounted for 40%

o Financial exploitation: most likely to be committed by the older adult’s children or grandchildren (39%)

- In some situations, the older adult is befriended by someone known to him or her, such as a person who mows the lawn or a cleaning person. The abuser gradually wins over the older adult by providing extra services or attention, so that, eventually, the older adult thinks of this person as a “new best friend,” and comes to trust him or her. The older adult may give the abuser gifts or money in order to maintain and strengthen the relationship. Gradually the abuser may become more demanding and, if the demands are not met, more threatening.

- Signs that a person is a perpetrator can include, but are not limited to:
  o Provides inconsistent or conflicting explanations about the older adult’s injuries
  o Isolates the older adult from family, friends, and social activities
  o Belittles, threatens, or insults the older adult
  o Ignores the older adult’s need for assistance or is reluctant to help the person
  o Does not speak to or provide companionship to the older adult, and isolates him or her from the outside world, friends, or relatives
  o Controls and dominates the older adult and his or her activities, is always present when anyone talks with the older person, speaks for him or her, and is overly protective or defensive
  o Handles the older adult roughly
  o Abuses the older adult’s pets
o Portrays self as older adult or only caring person in older adult’s life

o May be charming and helpful toward professionals and the older adult while others are present

o Justifies and minimizes own actions

o Has a history of being abusive

o May depend on the older adult for housing or other financial support
SECTION III:
CASE SCENARIOS

Time: 45 minutes

Competencies Addressed:

- **101-01-003** - Knows the legal definitions and the physical, behavioral, and emotional indicators of physical, sexual, and emotional abuse, neglect including abandonment, and exploitation of older adults

- **101-01-004** - Knows the concepts of undue influence and self-neglect and common physical, behavioral, and emotional indicators

Materials:

- PowerPoint Slide #19-20
- Trainer Resource #1, Case Scenarios

A. Case Scenarios

**Trainer Instruction**

- The purpose of this exercise is to help participants identify abuse, neglect, and exploitation situations, the older adults impacted, and perpetrators.

- Refer to **Trainer Resource #1, Case Scenarios**. There are three (3) separate case scenarios:
  - Tony and Josephina
  - Rosie and her parents
  - Jake and Regina

- Divide participants into three (3) groups and assign each a scenario.
Each group should identify a note taker and a person to report back to the entire group during the large group debriefing.

Instruct participants to read the scenario and respond to the questions provided under Part 1 (note that Part 2 will be completed later).

Once groups have completed the questions, ask for a group to report out by summarizing their scenario and responding to the questions. Debrief as a large group. Proceed to the next two (2) groups and process in the same manner.

Questions and Possible Answers

Tony and Josephina

- **Did abuse, neglect, or exploitation occur?**
  - History of physical and verbal abuse reported - domestic violence (Tony against Josephina) reported by son
  - Possible sexual abuse

- **What are the indicators?**
  - Henry's report that his father, Tony, told his mother, Josephina, “she was stupid and ugly,” “no other man would want her,” and “she was lucky he put up with her.”
  - Josephina left Tony on multiple occasions.
  - Tony has thrown things at Josephina, slapped her in the face, threatened to kill her, and once, pushed her down the stairs.
  - Bruises on breasts and inner thighs were noticed by aide. Josephina cries when asked about the injuries.
  - Tony reports “It’s nobody’s business but ours. She’s my wife and I can make love to her whenever I want.”

- **Who is the older adult?** Josephina
• Who is the alleged perpetrator? **Tony**

• What is the nature of the relationship between the older adult and alleged perpetrator(s)? **Intimate partner/spouse**

Rosie and her parents (Frank and Betsy)

• Did abuse, neglect, or exploitation occur?
  
  o Possible neglect
  
  o Possible physical abuse

• What are the indicators?
  
  o Rosie roughly jams spoon into father’s mouth. Frank is unable to feed himself. On one occasion, Rosie broke her father’s tooth.
  
  o The mother, Betsy, was found on the floor unresponsive by the home health aide. Betsy had several ulcers on her left hip and left leg. Paramedics noted that the carpeting beneath Betsy's body was badly soiled.

• Who is the older adult? **Betsy, Frank**

• Who is the alleged perpetrator(s)? **Rosie, Frank**

• What is the nature of the relationship between the older adult(s) and alleged perpetrator(s)? **Parent/child and husband/wife**

Jake and Regina

• Did abuse, neglect, or exploitation occur”
  
  o Possible financial exploitation

• What are the indicators?
  
  o Jake kicked and threatened his mother’s, Regina’s, dog to get her to give him money.
Jake has accepted loans from his mother that he never paid back.

Jake took and used Regina’s debit card without her permission and made two (2) withdrawals totaling $1000.

- **Who is the older adult?** Regina
- **Who is the alleged perpetrator(s)?** Jake
- **What is the nature of the relationship between the older adult and alleged perpetrator(s)?** Mother/son
SECTION IV: THE ROLE OF APS

Time: 25 minutes

Competency Addressed:

- **101-02-001** - Knows the role of adult protective services caseworkers and knows ethical, cultural, and best-practice standards in adult protective services

Materials:

- PowerPoint Slide #21-26
- Trainer Resource #1, Case Scenarios

A. What is the Role of APS?

**Trainer Instruction**

- Lead a large group discussion to cover the following content.

**Content to be Discussed**

- APS workers have a primary responsibility to respond to reports of older adult abuse, exploitation and neglect; to investigate the allegations and to work with the older adult to address their needs and to prevent further abuse, neglect, and exploitation.

- According to the OAC 5101:2-20-03, *Adult Protective Services Designated Agency Provisions*:
  - The county department of job and family services (CDJFS) may designate another agency to perform the following duties:
    - Receive and screen referrals, and investigate reports of abuse, neglect, or exploitation.
    - Evaluate the need for protective services.
    - To the extent of available funds, provide or arrange for the provision of protective services.
The CDJFS shall specify the duties of the designated agency.

The CDJFS shall enter into a contract or written agreement with the agency it selects to act as its designated agency.

The CDJFS has the ultimate responsibility to ensure that all reports assigned to a designated agency are investigated and managed in compliance with the law.

- Sometimes, APS responsibilities or interventions may overlap or conflict with the roles of other first-responders, such as law enforcement. Knowing your professional role, and working collaboratively with others, will greatly enhance the safety of the older adults you serve. Ongoing multi-disciplinary efforts, such as Interdisciplinary Teams (I-Teams), help to resolve these issues.

- The first responsibility of APS is to make sure that the older adult is safe and protected from immediate harm to the extent possible. This may involve temporarily removing the older adult from the dangerous situation if necessary with, of course, his or her permission, or if the person lacks capacity, with the legal authority of a court. It may also mean requesting assistance from law enforcement to deal with the alleged perpetrator.

- While protecting the older adult, the worker must also consider the older adult’s right to self-determination. Finding a balance between older adult safety and self determination is the most difficult challenge faced by APS professionals. Any intervention needs to take both issues into consideration. The older adult’s cognitive capacity must be addressed in this process.

- Understanding why abuse, neglect, and exploitation happens is a process that occurs over time and requires a thorough APS investigation, involving multiple contacts with the older adult, the alleged perpetrator, and others.

- When conducting an investigation, the APS worker investigates what happened, who is involved, and how and
why the abuse, neglect, or exploitation occurred. During this process, the focus must remain on the older adult’s safety. APS should always collaborate with other community agencies to bring the most resources and alternatives to the older adult.

B. Case Scenarios

**Trainer Instruction**

- The purpose of this activity is to help participants identify APS’ role in their case scenario.

- Utilizing *Trainer Resource #1, Case Scenarios*, ask participants to return to their small groups.

- Like before, each group should identify a note taker and a person to report back to the entire group during the large group debriefing.

- Instruct participants to respond to the questions provided in the scenario under Part 2. Responses should be limited to two (2) to three (3) items per question.

- After 15 minutes, ask groups to report their findings back to the large group. Ask reporters not to repeat items already mentioned by another participant.

- Make sure during the discussion to identify alleged perpetrators who are clearly incapable (case scenario Rosie and her parents) and those who had self-interested motivations for their behavior. The types of actions recommended relative to each type of perpetrator should be very different. For those who have dementia or are otherwise clearly incapable due to factors beyond their control, services and needed help for the older adult, and often for the perpetrator as well, are appropriate responses. For those who abuse, neglect, or exploit out of their own self-interest, holding them accountable and seeing through their “smoke screens” is extremely important.
Questions and Possible Answers

Tony and Josephina

- **What is APS’s role in this case?**
  - Conduct face-to-face interviews with Tony and Josephina.
  - Investigate allegations. Determine if the case should be screened in or out for APS.
  - If screened in, develop case plan with Josephina to the extent she can participate to reduce risk and to improve her safety.

- **What steps should the APS investigator take initially to promote the older adult’s safety and to begin the investigation?**
  - Talk to Josephina alone without Tony being present. Ask questions and listen.
  - Learn what Josephina wants to have happen. Create a safety plan. Offer information and referrals.
  - Document what is learned through the investigation.
  - Collect the evidence needed, including information from other people and record reviews, to support a substantiation decision.
  - Collaborate with other professionals as appropriate.

- **What other agencies could APS collaborate with?**
  - Sexual assault program
  - Domestic violence program
  - Law enforcement (restraining order)
  - Health care

- **What is APS’ role vis a vis the perpetrator, if any?**
o Would APS report this case to law enforcement?

o Would APS interview Tony? If yes, would APS try to influence his behavior in order to protect Josephina If so, how?

Rosie and her parents

• What is APS’s role in this case?
  o Conduct face-to-face interviews with Rosie, Frank, and Betsy.
  o Investigate allegations. Determine if the case should be screened in or out for APS.
  o If screened in, develop a case plan with Frank and Betsy to reduce risk and to improve safety.

• What steps should the APS investigator take initially to promote the older adult’s safety and to begin the investigation?
  o Talk to all the parties alone. Ask questions and listen.
  o Learn what Frank and Betsy want to have happen. Create a safety plan. Offer information and referrals.
  o Offer support services and education to Rosie.
  o Document what is learned through the investigation.
  o Collect the evidence needed, including information from other people and record reviews, to support a substantiation decision.
  o Collaborate with other professionals as appropriate.

• What other agencies could APS collaborate with?
  o Home health agency which provides aide
  o Aging network services providers
  o Emergency Response System
Physicians, therapists, (this could also include occupational therapist-education on techniques when assisting with feeding, assess for fall risks)

- **What is APS’ role vis a vis the perpetrator, if any?**
  
  - How would APS work with Rosie? Would Rosie be considered the client as well as her parents? In Ohio, Rosie would be referred to the local county Board of Developmental Disabilities.

**Jack and Regina**

- **What is APS’s role in this case (assume Regina is eligible for APS services)?**
  
  - Conduct a face-to-face interview with Regina.
  
  - Investigate allegations. Determine if the case should be screened in or out for APS.
  
  - If screened in, develop a case plan with Regina to reduce risk and to improve safety.

- **What steps should the APS investigator take initially to promote the older adult’s safety and to begin the investigation?**
  
  - Talk to Regina alone without Jake being present. Ask questions and listen.
  
  - Learn what Regina wants to have happen. Work with Regina to create a safety plan.
  
  - Document what is learned through the investigation.
  
  - Collect the evidence needed, including information from other people and record reviews, to support the substantiation decision.
  
  - Collaborate with other professionals as appropriate.
  
  - Provide information and referrals.
• **What other agencies could APS collaborate with?**
  
  o Aging network services providers
  
  o Disability and assistive devices agencies for the visually impaired
  
  o Bank or money management service, financial advisor to protect Regina’s assets
  
  o Legal system – law enforcement and an attorney to seek a restraining order

• **What is APS’ role vis a vis the perpetrator, if any?**
  
  o How would APS work with Jake?
  
  o Would APS report this case to law enforcement, given the threats, unpaid loans, and missing money from Regina’s account? Would the case be reported if Regina objected?
  
  o Would APS interview Jake? If yes, would APS try to influence his behavior to protect Regina? If so, how?
SECTION V: CAREGIVER STRESS AND ABUSER EXCUSES AND TACTICS

Time: 30 minutes

Competencies Addressed:

- **106-01-003** - Understands personal, interpersonal, and environmental vulnerabilities often associated with increased risk of maltreatment to older adults

- **106-01-004** - Understands the effect of family members’, caretakers’, or others’ power and control issues, mental illness, substance abuse, or domestic violence in perpetuating maltreatment of older adults

Materials:

- PowerPoint Slide #27-39

A. Caregiver Stress

**Trainer Instruction**

- Lead a large group discussion to cover the following content.

**Content to be Discussed**

- One of the most common excuses given for older adult abuse, neglect, or exploitation is “caregiver stress.” Unfortunately, early research concluded that caregiver stress was the primary cause of the problem. It suggested that an overwhelmed, stressed caregiver providing assistance to a frail older person might sometimes unintentionally “snap” and become abusive or neglectful.

- This conclusion was reached because some initial studies of older adult abuse were based on interviews with the abusers, who blamed the stress of caregiving for their behaviors. The
researchers failed to consider the fact that many abusers, as we have just seen, lie, manipulate, justify their behaviors and blame the older adult. This early research had significant influence on APS work in the field.

- More recent and reliable research found that maltreatment is more closely related to the characteristics of the abuser than to the care needs of the older adult. While caregiving is often stressful, most caregivers do not abuse, neglect, or exploit older adults. Instead, they provide loving and lifesaving care, often for many years, and frequently with significant costs to their own health and wellbeing.

- If any behavior would not be tolerated when used toward a child or a pet, it should never be tolerated or excused when used against an older adult.

- Current research does not support caregiver stress as a primary cause of older adult abuse, neglect, or exploitation.

**B. Abusers**

**Trainer Instruction**

- Lead a large group discussion to cover the following content.

**Content to be Discussed**

- “Accountability” means holding the abuser responsible for his or her actions. In domestic violence situations, “accountability” is used to mean the community holding the abuser accountable through arrest and prosecution. Criminal justice interventions are appropriate in APS cases which involve physical or sexual violence, criminal neglect, and criminal financial exploitation by perpetrators capable of forming “criminal intent” to carry out the unlawful acts, i.e., they know what they’re doing.

- In other cases, where the abuser lacks capacity, or perhaps the actions or neglect are not clearly criminal in nature, other forms of accountability may apply. It is important the abuser be told, unequivocally that the abusive or neglectful actions are wrong and must stop. Alternative methods for achieving results should be taught; one example would be on how to transfer a
person without resorting to overly rough handling. A written contract with an abuser may be effective, wherein the person agrees to take appropriate actions and to desist from doing harmful ones. Monitoring is a critical component of accountability. The older adult’s situation and the abuser’s actions should be regularly checked, and other persons coming in and out of the home (other family members and in-home aides) should be asked to keep an eye on things and to report any problems observed to APS.

- Furthermore, the older adult should be assured that the abuse, neglect, or exploitation is wrong, that she or he is not to blame for it, and that many other older adults are in similar situations.

- Abusers may present as suffering from caregiver stress, as “doing their best” and may blame the older adult for the abuse, neglect, or exploitation they themselves are perpetrating.

- It is important for APS to distinguish between abusers who truly lack capacity and those who are using power and control to advance their own self-interest.

- If an abuser does confess to committing maltreatment, it is often tied to an excuse that the abuser was not responsible for the incident. Either the abuser claims that he was not “himself” or “herself” when the abuse, neglect, or exploitation was committed, or that outside forces such as family dysfunction caused the behavior.

- Abuse, neglect, and exploitation is never the older adult’s fault. Anger, caregiver stress, and alcohol or other drug use may co-exist with the abusive behavior, but these issues do not cause the abuse, neglect, or exploitation.

- Offenders intentionally choose to use abusive tactics to get what they want.

- Like good magicians, abusers use “smoke and mirrors” to deceive others about their behavior.

- They use rationales and excuses such as caregiver stress to deflect responsibility from themselves, and to convince investigators not to hold them accountable for their actions.
• Abusers often will lie and try to manipulate investigators by using the same strategies that have been effective with the older adult, friends and family.

• Many abusers are charming and helpful to professionals. Less often, they act angry and belligerent, especially if they are being held accountable, or fear that the older adult will be offered help or be removed from their control.

• In other cases, abusers may be willing to talk about their behavior believing that if they explain it, others will buy into their reasons for why the abuse, neglect, or exploitation was unavoidable.

C. Tactics Used By Abusers

Trainer Instruction

• Solicit examples from participants regarding common tactics used by individuals who abuse, neglect, or exploit. Lead a large group discussion to cover the following content.

Content to be Discussed

• Abusers use a wide range of tactics to control older adults. Some, such as giving the older adult the “silent treatment,” are quite subtle. Others, such as threatening to kill a beloved pet, or waving a weapon, are overt. These tactics make up a pattern of behavior designed to manipulate and control the older adult.

• Consider the following examples:
  
  o Physical Abuse
    ▪ Slaps, hits, punches
    ▪ Throws things
    ▪ Burns
    ▪ Chokes
    ▪ Breaks bones
    ▪ Creates hazards
    ▪ Bumps or trips
    ▪ Forces unwanted physical activity
    ▪ Pinches, pulls hair, and twists limbs
    ▪ Restrains
- **Sexual Abuse**
  - Makes demeaning remarks about intimate body parts
  - Is rough with intimate body parts during care giving
  - Takes advantage of physical or mental illness to engage in sex
  - Forces sex acts that make the older adult feel uncomfortable and are against the older adult's wishes
  - Forces the older adult to watch pornography

- **Psychological Abuse**
  - Withholds affection
  - Engages in crazy-making behavior
  - Publicly humiliates or behaves in a condescending manner

- **Emotional Abuse**
  - Humiliates, demeans, ridicules
  - Yells, insults, calls names
  - Degrades, blames
  - Uses silence or profanity

- **Threatening**
  - Threatens to leave and never see the older adult again
  - Threatens to divorce or not divorce
  - Threatens to commit suicide
  - Threatens to institutionalize
  - Abuses or kills pet or prized livestock
  - Destroys or takes property
  - Displays or threatens with weapons

- **Targeting Vulnerabilities**
  - Takes or moves walker, wheelchair, glasses, dentures
  - Takes advantage of confusion
  - Makes older adult miss medical appointments

- **Neglect**
  - Denies or creates long waits for food, heat, care, or medication
- Does not report medical problems
- Understands but fails to follow medical, therapy, or safety recommendations
- Refuses to dress or dresses inappropriately

- Financial Exploitation
  - Depends on the older adult for housing or other financial support
  - Promises “lifelong care” in exchange for money
  - Gains access to financial accounts and money
  - Uses tactics such as joint bank accounts, deed and title transfers, power of attorney documents, Medicare fraud, charitable fraud, and unnecessary home improvements to exploit
  - Takes out a mortgage on the older adult’s home (reverse mortgage scams)
  - Steals the older adult’s identity, credit cards, medical cards, or Social Security number
  - Uses older adult’s fear of financial insecurity to purchase unneeded, inadequate, unethical, or confusing investments (living trust and annuities scams; deceptive marketing tactics)

- Denies Access To Spiritual Traditions or Events
  - Denies access to ceremonial traditions or church
  - Ignores religious tradition

D. Common Abuser Justifications

**Trainer Instruction**

- Solicit examples from participants regarding common justifications heard from abusers. Lead a large group discussion to cover the following content.

**Content to be Discussed**

- Abusers often use excuses or justifications to explain away their abusive behavior to avoid accountability. Some explanations focus on blaming the older adult, saying or implying that it is the older adult’s difficult behavior that causes the abuse, neglect, or exploitation.

- Consider the following examples:
<table>
<thead>
<tr>
<th>FORM OF ABUSE</th>
<th>Justification / Defense</th>
<th>Investigation Considerations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Abuse</td>
<td>“She fell.”</td>
<td>Does the medical or physical evidence match the description of events?</td>
</tr>
<tr>
<td></td>
<td>“He’s just clumsy.”</td>
<td>Does the medical or physical evidence match the description of events?</td>
</tr>
<tr>
<td></td>
<td>“I was trying to help.”</td>
<td>Does the medical or physical evidence match the description of events?</td>
</tr>
</tbody>
</table>
| | “She bruises easily.” | Does the medical or physical evidence match the description of events?  
| | | Is the older adult taking medications that can cause a person to bruise easily? |
| | “It was an accident.” | Does the medical or physical evidence match the description of events? |
| | “He has Alzheimer’s disease or he’s crazy. You can’t believe what he says.” | Do the medical history and mental health experts support this assertion?  
| | | What are your observations of those involved at different periods of time? |
| | “I was defending myself.” | Is there sign of a defensive injury?  
| | | Who is the predominant (or primary) physical aggressor? |
| Neglect | “She has always lived like this. She’s not a good housekeeper.” | Are there sufficient resources to provide for the older adult’s needs?  
| | | Has the older adult’s capacity changed over time?  
| | | Is there a caregiver?  
<p>| | | Do friends or family members support this statement? |</p>
<table>
<thead>
<tr>
<th>Statement</th>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I’m doing the best I can. Taking care of him is very difficult.”</td>
<td>Does the older adult have sufficient capacity to make informed decisions about care, including refusing to accept care or treatment?</td>
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<td></td>
<td>Does the older adult have a history of refusing help?</td>
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<td>Does the alleged perpetrator have a duty to provide care?</td>
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<td></td>
<td>Is the alleged perpetrator receiving payment to provide care?</td>
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<td></td>
<td>Has the caregiver been instructed on the older adult’s condition, care needs and how to provide care?</td>
</tr>
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<td></td>
<td>Does caregiver have any special training in providing care?</td>
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<td></td>
<td>Are the older adult’s care needs obvious and would be apparent to the average person?</td>
</tr>
<tr>
<td>&quot;He doesn’t want medication/medical treatment. I’m honoring his wishes.&quot;</td>
<td>Is there documentation of the older adult’s wishes (for example, a do not resituate order [DNR])?</td>
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<td></td>
<td>What is the older adult’s capacity, as documented by a trained professional?</td>
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<td></td>
<td>Are there historical statements of intent or the desires of the older adult?</td>
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<td></td>
<td>What is the health history of the older adult’s condition?</td>
</tr>
<tr>
<td>“I didn’t know how sick she was or what she needed.”</td>
<td>Is there a medical history indicating how often the older adult was taken to a doctor and what was told to those involved about the older adult’s condition?</td>
</tr>
<tr>
<td>“I’m just doing what she (the older adult) wants.”</td>
<td>Do wills or advanced directives describing what the older adult wants exist?</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>“She wants to have sex with me.” Or “She likes watching pornographic movies with me.”</td>
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<td>---------------</td>
<td>------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>“He’s my husband/boyfriend.”</td>
<td>If the older adult has capacity, what is the older adult’s account of what happened? If the older adult does not have capacity, the older adult cannot consent.</td>
</tr>
<tr>
<td>“I was just cleaning or bathing him. This is not sexual abuse.”</td>
<td>What does a health care provider say about whether appropriate caregiving techniques were being used?</td>
</tr>
<tr>
<td>“She came on to me.”</td>
<td>If the older adult has capacity, what is the older adult’s account of what happened? If the older adult does not have capacity, the older adult cannot consent.</td>
</tr>
<tr>
<td>“We’re consenting adults.”</td>
<td>If the older adult has capacity, what is the older adult’s account of what happened? If the older adult does not have capacity, the older adult cannot consent.</td>
</tr>
<tr>
<td>“She acted like she liked it.”</td>
<td>If the older adult has capacity, what is the older adult’s account of what happened? If the older adult does not have capacity, the older adult cannot consent.</td>
</tr>
<tr>
<td>“She’s my wife. I have the right.”</td>
<td>Check state marital rape laws. If the older adult has capacity, what is the older adult’s account of what happened? If the older adult does not have capacity, the older adult cannot consent.</td>
</tr>
<tr>
<td>Financial Exploitation</td>
<td>Loan</td>
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<td></td>
<td>What is the capacity of the older adult?</td>
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<td>Is there written proof of the loan including the amount and period of loan and were other loans made?</td>
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<td></td>
<td>What are the terms of repayment and were any repayments made?</td>
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<tr>
<td>Gift for self or children</td>
<td>What is the capacity of the older adult?</td>
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<td>What is the value of the gift?</td>
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<td></td>
<td>What is relationship between others and older adult?</td>
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<td></td>
<td>Is there evidence of the older adult’s intent to make a gift?</td>
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<td></td>
<td>Why was a gift made? Any promises or other inducements?</td>
</tr>
<tr>
<td>Services provided</td>
<td>What is the capacity of the person seeking the services?</td>
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<tr>
<td></td>
<td>What were the services; were they needed; how often were services provided; how well performed; were supplies provided?</td>
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<td>What is the value of services vs. amount paid for them?</td>
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<tr>
<td>Permission</td>
<td>What is the capacity of the older adult?</td>
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<td></td>
<td>Is there evidence of actual permission?</td>
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<td></td>
<td>Were there promises or other inducements to get permission?</td>
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<td></td>
<td>Who benefited?</td>
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<td>How often was permission used?</td>
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<td>What is the value of items obtained?</td>
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<td></td>
<td>Did the older adult understand what permission was used to do?</td>
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</tbody>
</table>
| “She lets me live with her in exchange for helping with errands.” (Quid Pro Quo) | What is the capacity of the older adult?  
Is the marriage reasonable given the relationship between the parties?  
Is the suspect legally able to marry?  
Are there any suspect misrepresentations? |
| “She freely gave me use of her car as a favor to me.” | What is the capacity of the older adult?  
Who benefits from the favor; what did older adult receive in return; is the benefit reasonable?  
How does it fit prior financial planning and actions of the older adult?  
Did the alleged perpetrator receive payment to provide care?  
What is older adult’s relationship to business or person? |
| “But I do not know her PIN.” | What is the contrary evidence?  
Did the suspect have access to information?  
Were there other acts for same goal? (e.g., forged her signature to get an ATM card in older adult’s name) |
| Legal authority (Power of Attorney, Conservator) | What is the capacity of the older adult?  
Is there legal authority in writing?  
What does the legal authority cover and expressed or implied limitations? |
| “He is crazy.” | Is there a medical opinion of older adult’s mental health?  
Are there statements from friends and family about the older adult’s behavior prior to and after suspect came into life? |
<table>
<thead>
<tr>
<th>Question</th>
<th>Who is benefiting financially?</th>
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</thead>
<tbody>
<tr>
<td>Does the older adult take any medications?</td>
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<tr>
<td>What was the older adult’s behavior around time of questioned events?</td>
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<tr>
<td>Is this conduct consistent with earlier times?</td>
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<tr>
<td>“I’m the real older adult.”</td>
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<tr>
<td>“We’re in love” married/in a relationship.”</td>
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<tr>
<td>“We’re family.” “She’s like a mother to me” therefore, we share resources.</td>
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<tr>
<td>Purchase made as part of care</td>
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<td>Is there evidence of purchase being used to provide care?</td>
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<tr>
<td>Is the purchase necessary for care?</td>
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</tbody>
</table>
SECTION VI:  
THE BREAKING POINT

Time: 25 minutes

Competency Addressed:

- 101-01-005 - Knows interpersonal and intrapersonal dynamics and vulnerabilities commonly associated with physical, sexual, and emotional abuse, neglect, undue influence, exploitation, and self-neglect of older adults

Materials:

- PowerPoint Slide #40-44
- Trainer Resource #2, Intake Report for Nancy
- Nancy, Part 1 and Part 2 Video Clips

A. Nancy - Part 1

Trainer Instruction

- Refer to Trainer Resource #2, Intake Report for Nancy and read the report alleging Nancy's mother is in danger.

- Next, show the video clip, Nancy Part 1, of Nancy talking about her close relationship with her mother (click on the PowerPoint slide to start the video). There is a YouTube option available at: https://youtu.be/A2J8fWDlaEE. Note, that the YouTube video should be stopped at 1:44.

- As a large group activity, pose the following questions and solicit responses.

  - What is your initial impression of Nancy?
    - Nancy presents as a well-dressed and well-educated middle-class woman.
    - She stresses how close she and her mother were as well as her commitment to care for her mother after her stroke. Nancy makes several
statements about how difficult her mother was to care for and how much stress she herself was under.

° Did you find the intake report plausible?
  Possible Responses
  ▪ The intake report alleges physical and emotional abuse by Nancy against her mother. New APS workers may find it hard to believe that a person presenting as Nancy does could physically abuse her mother.

° What are some questions you would ask Nancy’s mother on your first visit?
  Possible Responses
  ▪ Tell me what a typical day is like for you.
  ▪ Is the care you receive adequate?
  ▪ Do you feel safe living here and being cared for by your daughter?
  ▪ Have you ever been threatened or physically harmed in any way? If yes, by whom?
  ▪ Are you afraid of anyone?
  ▪ We are concerned that you have bruises. Do you know how you got them?
  ▪ Do you get to see friends and family? Do people visit?

° What are some questions you would ask Nancy on your first visit?
  Possible Responses
  ▪ Tell me about a typical day caring for your mother.
  ▪ Have you ever felt out of control when caring for your mother? What did you do?
  ▪ What do you do or who do you tell when you are feeling stressed?
  ▪ Is your mother physically or verbally abusive toward you?
  ▪ Are you neglecting your own health?
  ▪ We had a report about the bruises on your mother, do you know how she got them?
  ▪ Some people find it difficult to care for a parent with your mother’s condition. Do you?
- Sometimes providing care for a family member is challenging. Do you ever feel like you will lose control?
- What measures have you taken to look after your own health and wellbeing?
- Have you asked anyone for help?

B. Nancy - Part 2

Unable to render image

**Trainer Instruction**

- Show Part 2 of the video clip by clicking on the slide.
- Pose the following questions and solicit responses:
  - Given what you now know about Nancy, would you change anything you said in the previous discussion?
  - Did you suspect serious physical abuse when you first met Nancy?
  - Do you think some investigators might initially believe that she was a stressed caregiver?
  - What lessons can you take away from this?
    - The obvious lesson is that appearances are often deceiving.
    - This case makes it clear that perpetrators can be manipulative and in control. APS investigators need to keep this in mind when perpetrators tell them how hard their lives are because of all the care needs of the older adult.
  - What interventions would have been appropriate for Nancy when she was her mother’s caregiver? How should she have been held accountable?
    - Nancy was guilty of domestic violence; that is, she committed serious violent crimes. The case should have been referred to law enforcement for investigation and prosecution. APS’ responsibility would be to work with Nancy’s mother to ensure

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APS Core: *Dynamics of Older Adult Maltreatment*. Written by NAPSA
Adapted by IHS for Ohio Human Services Training System
Revised November 2018
that she understood the situation, to explain the importance of Nancy being held accountable, to provide her with as much control as possible, and to help insure that she had access to good care and support under the circumstances.
SECTION VII: 
THE POWER AND CONTROL WHEEL

Time: 45 minutes

Competencies Addressed:

- **101-02-001** - Knows the role of adult protective services caseworkers and knows ethical, cultural, and best-practice standards in adult protective services

- **106-01-004** - Understands the effect of family members’, caretakers’, or others’ power and control issues, mental illness, substance abuse, or domestic violence in perpetuating maltreatment of older adults

Materials:

- PowerPoint Slide #45-51
- Handout #2, Power and Control Wheel
- Trainer Resource #1, Case Scenarios

A. An Underlying Dynamic of Abuse

**Trainer Instruction**

- Lead a large group discussion to cover the following content.

**Content to be Discussed**

- Abuse of persons in ongoing, familiar relationships often involves a pattern of coercive tactics used to gain and maintain power and control.

- While physical and sexual violence may be present, some older adults are controlled through intimidation, threats, emotional and psychological abuse, neglect, and isolation – no physical abuse is necessary.
In an abusive relationship, one party fears the other and attempts to comply with the other's wishes to avoid harm.

APS workers should be familiar with these tactics and alert to the possibility that they may be at work in any case. Investigators should determine if power and control tactics are being used to manipulate and coerce the older adult.

B. Power And Control Wheel

**Trainer Instruction**

- Refer participants to **Handout #2, Power and Control Wheel** and lead a large group discussion.

**Content to be Discussed**

- The Power and Control Wheel for Abuse in Later Life is a tool widely used in the domestic violence field to describe tactics used by abusers to gain control over older adults.

- It was adapted by the National Clearinghouse on Abuse in Later Life (NCALL) from the Power and Control Wheel developed by the Duluth Domestic Abuse Intervention Project in 1980, to specifically address abuse in later life.

- Older adults themselves were involved in identifying the tactics that are commonly used, and how those included the emotional and psychological abuse that they experienced in their relationships.

- The outer rim of the wheel defines violence or the threat of violence that is evident in the relationship. The violence may be frequent or very limited, but fear and threats are always present. The abuser uses the threats to maintain power and control.

- Each piece of the pie represents a different tactic an abuser may use.

- Abusers may use one tactic more often than others, and do not necessarily use all of them.
• Any combination of tactics may be used to establish and maintain control.

• The wheel makes a distinction between emotional and psychological abuse.

• Emotional abuse is specific tactics such as name-calling, put-downs, yelling, and verbal attacks used to demean the older adult. Psychological abuse is the ongoing, manipulative, crazy-making behavior that becomes an overriding factor in abusive relationships. Sometimes it can be very subtle; in other cases, it is intense and invasive.

• The center of the wheel represents the goal or outcome of all these behaviors: power and control over the older adult.

• The theory behind wheel assumes that the abuser’s behaviors are intentional, and abusers are responsible for the harm that they cause.

C. Case Scenarios

Trainer Instruction

• Ask participants to return to small groups and refer to Trainer Resource #1, Case Scenarios and their assigned scenario.

• Ask participants to respond to the following questions:
  
  o Can you name a tactic that was used in your case scenario?

  o Where on the wheel would it go?

Possible Responses

Tony and Josephina

  o Henry’s report that his father told his mother “she was stupid and ugly” “no other man would want her” “lucky he put up with her” (Emotional abuse)
o Tony has thrown things at Josephina, slapped her in the face, threatened to kill her, and once, pushed her down the stairs. *(Threatens; physical violence)*

o Bruises on breasts and inner thighs were noticed by aide. Josephina cries when asked about the injuries. *(Physical; suspected sexual violence)*

o Tony reports “It’s nobody’s business but ours. She’s my wife and I can make love to her whenever I want.” *(Uses privilege)*

**Rosie and her parents**

o Rosie roughly jams spoon into father’s mouth. Frank is unable to feed himself. On one occasion, Rosie broke her father’s tooth. *(Physical abuse)*

o The mother, Betsy, was found on the floor unresponsive by the home health aide. Betsy had several ulcers on her left hip and left leg. Paramedics noted that the carpeting beneath Betsy’s body was badly soiled. *(Neglect)*

**Jake and Regina**

o Jake kicked and threatened his mother’s, Regina’s, dog to get her to give him money. *(Financially exploits; threatens)*

o Jake has accepted loans from his mother that he never paid back. *(Financially exploits)*

o Jake took Regina’s ATM card without her permission and made two (2) withdrawals totaling $1,000 *(Financially exploits; targets vulnerabilities; theft – she could not see him take the card and had shared her PIN because she needed help to make withdrawals)*
D. APS Role

**Trainer Instruction**

- Pose the following question to the large group and solicit responses.
  
  How would being familiar with the wheel help in investigating a case?

**Content to be Discussed**

- APS investigations should always include determining if power and control tactics are being used to manipulate or coerce the older adult.

- The abuser excuses, and justifications listed above should never be taken at face value but rather need to be considered in the context of the entire investigation.

- Intervention strategies should always focus on improving older adult safety to the degree possible, which can only be accomplished if the underlying dynamics of maltreatment are understood and considered.

- Older adult and worker safety issues are at the forefront in case planning and intervention.

- Knowing that the APS worker truly understands his or her situation and is attempting to offer the most appropriate help will make the older adult more receptive to APS involvement.

- The worker will be less likely to collude with the abuser by believing his or her excuses and focusing on him or her rather than the older adult.

- Issues may arise if a worker is unaware of a power and control situation. For example:
  
  Remedies to reduce stress, anger, or substance abuse or to provide in-home services do not address the underlying power and control dynamics (i.e., the causes of the abuse).
Older adult (and worker) safety is not adequately addressed.

Abuser is not held accountable. The message is that he or she can continue to abuse with no consequences; in fact, the interventions provided may reinforce abusive behavior.

- In conducting an APS investigation, always consider the following questions:
  - Is the maltreatment the result of power and control?
  - What are the perpetrator’s explanations, excuses, or justifications? What words do you listen for?
  - Was undue influence (threats, or intimidation) used?
  - What is the perpetrator’s accountability?
  - What does the older adult want?
  - What provides the greatest measure of safety for the older adult?
  - What roles do older adult and perpetrator capacity play?
  - What other agencies or collaborators can provide information and assistance?

- The focus of any APS intervention is to make sure, to the extent possible and while protecting rights, that the older adult does not suffer additional abuse, neglect, or exploitation.
SECTION VIII: 
WHY OLDER ADULTS STAY OR REFUSE INTERVENTION

Time: 80 minutes

Competencies Addressed:

- **105-02-002** - Understands dynamics that can reduce an older adult’s willingness or ability to provide information about their situation to the investigating caseworker

- **106-01-009** - Knows that the relationship between the perpetrator of maltreatment and the older adult is often complex, and that the older adult may feel an allegiance with the perpetrator

Materials:

- PowerPoint Slide #52-60

- Trainer Resource #3, Resources for Comings and Goings Activity

- Six (6) small boxes or envelopes

- Play money and goodwill slips divided into packets

- A bell (if not available, clap or whistle)

- Trainer Resource #4, Comings and Goings Script

- Video - *Just to Have a Peaceful Life*

A. Why Older Adults Stay or Refuse Intervention

**Trainer Instruction**

- In a large group, pose the following questions and solicit responses.
Why might an older adult choose to stay in, or return to, abusive situations?

Possible Responses

- All relationships where there is love, trust or an expectation of trust may be difficult to end. Often the older adult wants the abuse, neglect, or exploitation to stop but also wants to maintain the relationship. Older adults may engage in behaviors that protect the abuser, such as not giving accurate information or recanting.

Does it make a difference if the abuser is an adult child? A partner? A paid caregiver?

Possible Responses

- For older adults abused, neglected, or exploited by adult children, it can be very difficult or impossible to report. Most older adults will want to protect their children and try to continue to have contact with them in a way that is safe. Older adults cannot divorce their children and often continue to hope that they will change.

- For older adults who are victims of intimate partner violence, many have been in relationships for 40, 50, or 60 years. They may not believe in divorce and may be unwilling to end the relationship. Other older adults may have been in shorter relationship and still may not be willing to end a relationship. But there are older adults who are willing to consider divorce or separation.

- When the abuser is a paid caregiver, often there is a fear of a new caregiver being worse or that there will not be a caregiver at all. Many older adults fear nursing home placement more than anything else.

How might the older adult’s actions affect the investigation?

Possible Responses

- Older adults may:
  - Choose not to tell the investigator everything or anything
  - Recant
• Seem to work harder to protect the perpetrator than themselves
• Refuse to accept any services or interventions
• Be especially confused and uncertain about what to do or what they have previously agreed to do if there are cognitive impairments
• Be more concerned with preserving their independence than their safety

  o *Is it frustrating for APS when older adults don’t leave or take action?*

  **Possible Responses**
  • It can be for workers who do not understand the dynamics of older adult abuse, neglect, or exploitation, or the many losses and concerns that can be associated with major life changes. Making decisions is often a process of small steps forwards and backwards.

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**B. Comings and Goings Activity**

**Trainer Instruction**

• This activity is designed to give participants a sense of the limited alternatives available to many older adults, and to demonstrate that each alternative often carries a significant cost in terms of either money or the goodwill of others.

• Refer to **Trainer Resource #3, Resources for Comings and Goings Activity**. There are six (6) location signs (home, relative’s home, hotel, apartment, domestic violence shelter, and independent living facility) and two (2) Closed Signs.

• Hang the signs provided in different locations around the room. Make sure there is room for at least several participants to stand near each sign. Place small boxes or envelopes under or near each sign for participants to place their payments.

• Refer to the **play money** and **goodwill slips** provided. Ensure that money and goodwill slips are divided into packets. There must be one (1) packet for each participant. Each packet
should contain varying amount of money (from one (1) to six (6) bills in each) and goodwill slips (from one (1) to four (4) in each). Distribute one (1) packet to each participant.

- Next, read these instructions to the group:

  o Each participant will be a 68-year-old woman who faces several choices. You can see that several locations are indicated around the room. I will first read you a description of the woman’s situation and will provide other additional information about her throughout the activity.

  o You will see that each location (except HOME, which is ALWAYS FREE) exacts a price in either money or in others’ goodwill (you can only ask the same people for help so many times). The costs of each are shown on the signs.

  o Every time the bell is rung (clicks, claps) you must choose one of the available locations. If you want to stay where you are, you MUST either pay again (unless you’re home) or move to another location.

  o Please do not speak to each other during this exercise. You are a woman alone facing your own choices.

  o As in real life, each of you received a different amount of money and goodwill slips in your packet. If you run out of resources, you MUST RETURN HOME.

  o Note: You may have to repeat one or more of these directions throughout the exercise, especially the “no talking” one!

  o To start: Everyone, please now move to location “HOME” and you will hear the first part of the case scenario.

- Refer to Trainer Resource #4, Comings and Goings Script which provides details about the older adult’s situation and additional information to read throughout the activity.
At the conclusion of the activity, ask everyone to resume their seats and ask them how they felt as they were “coming and going” through their choices.

- How did this activity make you feel?
- Why did you make the choices you did?
- Did anyone try to cheat or steal? What happens with older adults who do that?
- Did anyone want to retaliate?
- What did this tell you about the choices older adults have and make?
- What did this tell you about the importance of collaboration in APS?

C. Just To Have A Peaceful Life

Trainer Instruction

- Refer to the video, Just to Have a Peaceful Life. Click on the slide to play the video. Share with participants that this video shows an older adult in an abusive relationship making decisions about whether to stay with her husband or to leave for a “peaceful life.” Note that even though in many states Pat would not be eligible to be an APS client, there are many valuable lessons to be learned from her situation.

- As participants are viewing this video, ask them to consider the following questions and debrief. Possible responses are noted below.

  - What factors kept Pat from leaving permanently?
    - Fear
    - Economic issues, including access to health insurance, her home, his pension or social security income
    - Health (his and hers)
    - Hope that things would get better
Belief that if she stayed for the children she could leave later, not realizing that she would get older and have health problems

Would Pat be an APS client in your county? If not, the APS intake worker should know to refer her to the local domestic violence program and aging services program.

What interventions might have helped Pat?
- Support group with other older battered women
- Referral to a domestic violence program
- Peer counseling
- Legal advocacy
- In-home help for husband
- Other services to reduce her isolation
- Benefits counseling regarding Medicare, Medicaid, and Social Security
SECTION IX: 
TRANSFER OF LEARNING

Time: 15 minutes

Materials:

- PowerPoint Slide #61

Trainer Instruction

- In a large group, pose the following statement: “One skill that I will need to acquire or strengthen is…” Ask for volunteers to share a few examples with the group.
- Review any remaining parking lot questions.
REFERENCES

Note: All References and Author acknowledgements can be view on the individual training modules via The NAPSA Web site http://www.napsa-now.org/ as well as additional APS Core Training Modules.

Additional References:


